

APPLICATION DATA SHEET

Application Information

Application Number:: (not yet assigned)
Filing Date:: August 7, 2003
Application Type:: Regular
Subject Matter:: Utility
Suggested Classification::
Suggested Group Art Unit::
CD-ROM or CD-R?::
Number of CD Disks::
Number of Copies of CDs::
Sequence Submission?::
Computer Readable Form (CFR)?::
Number of Copies of CFR::
Title:: Interactive Tool for Removal of Isolated Objects on
Raster Images
Attorney Docket Number:: 36488-188318
Request for Early Publication?::
Request for Non-Publication?:: Yes
Suggested Drawing Figure:: 1
Total Drawing Sheets:: 6
Small Entity?::
Latin Name::
Variety Denomination Name::
Petition Included?::
Petition Type::
Licensed US Govt. Agency::
Contract or Grant Numbers::
Secrecy Order in Parent Appl.::

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship:: Canada
Country:: Canada
Status:: Full Capacity
Given Name:: Stéphane
Middle Name::
Family Name:: Côté
Name Suffix::
City of Residence:: Lac Beauport
State or Province of Residence:: Québec
Country of Residence:: Canada
Street of Mailing Address:: 14 Montée du Golf
City of Mailing Address:: Lac Beauport
State or Province of Mailing Address:: Québec
Country of Mailing Address:: Canada
Postal or Zip Code of Mailing Address:: G0A 2C0

Applicant Authority Type:: Inventor
Primary Citizenship::

Country::
Status:: Full Capacity
Given Name::
Middle Name::
Family Name::
Name Suffix::
City of Residence::
State or Province of Residence::
Country of Residence::
Street of Mailing Address::

City of Mailing Address::
State or Province of Mailing Address::
Country of Mailing Address::
Postal or Zip Code of Mailing Address::

Applicant Authority Type:: Inventor
Primary Citizenship::
Country::
Status:: Full Capacity
Given Name::
Middle Name::
Family Name::
Name Suffix::
City of Residence::
State or Province of Residence::
Country of Residence::
Street of Mailing Address::
City of Mailing Address::
State or Province of Mailing Address::
Country of Mailing Address::
Postal or Zip Code of Mailing Address::

Applicant Authority Type:: Inventor
Primary Citizenship::
Country::
Status:: Full Capacity
Given Name::
Middle Name::
Family Name::

Name Suffix::

City of Residence::

State or Province of Residence::

Country of Residence::

Street of Mailing Address::

City of Mailing Address::

**State or Province of Mailing
Address::**

Country of Mailing Address::

**Postal or Zip Code of Mailing
Address::**

Correspondence Information

**Correspondence Customer
Number::** 26694

Phone Number:: (202) 962-4800

Fax Number:: (202) 962-8300

E-Mail Address::

Representative Information

**Representative Customer
Number::** 26694

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
	Continuation of		
	Continuation of		
	Continuation of		
	Continuation of		

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::

Assignee Information

Assignee Name:: Bentley Systems Inc.
Street of Mailing Address:: 685 Stockton Drive
City of Mailing Address:: Exton
State or Province of Mailing Address:: Pennsylvania
Country of Mailing Address:: USA
Postal or Zip Code of Mailing Address:: 19341-0678
